

Law Offices

HOLLAND & KNIGHT LLP

One Atlantic Center
1201 West Peachtree Street, N.E.
Suite 2000
Atlanta, Georgia 30309-3400

404-817-8600
FAX 404-881-0470
<http://www.hklaw.com>

FAX RECEIVED

MAY 30 2002

GROUP 1600

Atlanta
Boston
Bradenton
Chicago
Fort Lauderdale
Jacksonville
Lakeland
Los Angeles
Melbourne
Miami
New York
Northern Virginia
Orlando
Providence
San Antonio
San Francisco
Seattle
St. Petersburg
Tallahassee
Tampa
Washington, D.C.
West Palm Beach

International Offices:
Caracas*
Helsinki
Mexico City
Rio de Janeiro

Sao Paulo
Tel Aviv*
Tokyo

Representative Offices

FACSIMILE

| | | |
|--|---|--|
| TO: | | |
| Group 1600 - Examiner G. Gabel | Assistant Commissioner for Patents | 703-308-4556 |
| NAME | COMPANY/FIRM | FAX NUMBER |
| Washington | DC | (TELEPHONE NUMBER) |
| CITY | STATE | |
| FROM: | | |
| Patrea L. Pabst | 404-817-8473 | 28 |
| NAME | TELEPHONE | TOTAL PAGES (Including Cover Sheet) |
| FOR THE RECORD: | | |
| DATE: May 29, 2002 | URGENCY: <input checked="" type="checkbox"/> SUPER RUSH | <input type="checkbox"/> RUSH <input type="checkbox"/> REGULAR |
| FAXED BY: | FILE #: 079099/00018 | CLIENT NAME: SRX 110 |
| CONFIRMED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | NAME: | TIME: |
| If you did not receive all of the pages or find that they are illegible, please call (404) 817-8500 | CONFIDENTIALITY NOTICE: This facsimile, along with any documents, files, or attachments, may contain information that is confidential, privileged, or otherwise exempt from disclosure. If you are not the intended recipient or a person responsible for delivering it to the intended recipient, you are hereby notified that any disclosure, copying, printing, distribution or use of any information contained in or attached to this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by facsimile or by telephone collect at the numbers stated above, and destroy the original facsimile and its attachments without reading, printing, or saving in any manner. Your cooperation is appreciated. Thank you. | |

MESSAGE:

Further to our telephone conversation, attached are the documents which were filed via facsimile on November 19, 2001, along with the fax confirmation sheet, in reference to the following application:

Applicant: Judith Fitzpatrick, Regina B. Lenda, and Christopher L. Jones
 Serial No.: 09/626,582 Art Unit: 1641
 Filed: March 16, 2000 Examiner: Geilene R. Gabel
 For: METHOD AND DEVICE FOR DETECTION OF APO A, APO B AND THE RATIO THEREOF IN SALIVA

Law Office
HOLLAND & NIGHT LLP

One Atlantic Center
1201 West Peachtree Street, N.E.
Suite 2000
Atlanta, Georgia 30309-3400

404-817-4500
FAX 404-817-0470
<http://www.hnllp.com>

| | |
|-----------------|------------------|
| Atlanta | West Virginia |
| Boston | SDN |
| Broadway | Marco |
| Chicago | East Newark |
| Fort Lauderdale | East Providence |
| Jacksonville | Seattle |
| Lafayette | St. Petersburg |
| Los Angeles | Tel Aviv |
| Houston | Toronto |
| Miami | Washington, D.C. |
| New York | West Palm Beach |

International Office
Cancun
Mexico City
Montreal, Quebec

File an Amicus
Brief
Fax
Tel. 404
Teleconferencing

FACSIMILE

| | | |
|---|---|-------------------------------------|
| TO: | Assistant Commissioner for Patents COMPANY/TELE | 708-272-8208 FAX NUMBER |
| Group 1600 - Before Final NAME Washington CITY | DC STATE | TELEPHONE NUMBER |
| FROM: Patricia L. Pabst | 404-817-8478 | 27 |
| NAME | TELEPHONE | TOTAL PAGES (including Cover Sheet) |
| MESSAGE: | | |
| Applicant: Judith Fitzpatrick, Regina B. Lende, and Christopher L. Jones | | |
| Serial No.: | 09/626,682 | Art Unit: 1641 |
| Filed: | March 16, 2000 | Examiner: Galia R. Gabel |
| For: | METHOD AND DEVICE FOR DETECTION OF APO A, APO B AND THE RATIO THEREOF IN SALIVA | |
| FOR THE RECORD: | | |
| DATE: November 19, 2001 | URGENCY: <input type="checkbox"/> SUPER RUSH <input type="checkbox"/> RUSH <input type="checkbox"/> REGULAR | |
| FAKED BY: | FILED: 07/09/2001 | CHART NAME: 5RX 110 |
| CONFIRMED: <input type="checkbox"/> YES <input type="checkbox"/> NO | NAME: <input type="checkbox"/> TIME: | |
| If you did not receive all of the pages or find that they are illegible, please call (404) 817-8500 | | |
| CONFIDENTIALITY NOTICE: This facsimile, along with any documents, files, or attachments, may contain information that is confidential, privileged, or otherwise exempt from disclosure. If you are not the intended recipient, or a person responsible for delivering it to the intended recipient, you are hereby notified that any disclosure, copying, printing, distribution or use of any information contained in or attached to this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by facsimile or by telephone (all of the numbers listed above, and, if necessary, the original facsimile and its attachments) without reading, printing, or saving in any manner. Your cooperation is appreciated. Thank you. | | |

FAX RECEIVED

MAY 30 2002

GROUP 1600

05/29/2002

TX RESULT REPORT

NAME:
TEL:
DATE: NOV. 19 '2001 18:52

| SESSION | FUNCTION | NO. | DESTINATION STATION | DATE | TIME | PAGE | DURATION | MODE | RESULT |
|---------|----------|-----|----------------------|---------|-------|------|-----------|------|--------|
| 7675 | TX | 01 | 9099#18#17038729306# | NOV. 19 | 18:44 | 027 | 00H08'06" | ECM | OK |

Docketed for _____
By: CGS _____
Date: 11/29/02 _____

Please type a plus sign (+) inside this box →

PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

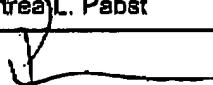
TRANSMITTAL FORM

| | |
|--|---|
| | Application Number 09/526,582 |
| | Filing Date March 16, 2000 |
| | First Named Inventor Judith Fitzpatrick |
| | Group Art Unit 1614 |
| | Examiner Name Gallene R. Gabel |
| Total Number of Pages in This Submission 1 | Attorney Docket Number SRX 110 |

ENCLOSURES (check all that apply)

| | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (see below for details) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Statement Under 37 CFR § 3.73(b) |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|-------------------------------|---|--|--|
| Firm or Individual name | Holland & Knight LLP <i>Patricia L. Pabst</i> | | |
| Signature |  | | |
| Date | November 19, 2001 | | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

| | | | |
|-----------------------|---|--|--|
| Typed or printed name | SEE ATTACHED CERTIFICATE OF FACSIMILE TRANSMISSION | | |
|-----------------------|---|--|--|

| | | |
|-----------|------|--|
| Signature | Date | |
|-----------|------|--|

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

079099/00018

PTO/SB/17 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 73.00)

Complete if Known

| | |
|----------------------|--------------------|
| Application Number | 09/526/582 |
| Filing Date | March 16, 2000 |
| First Named Inventor | Judith Fitzpatrick |
| Examiner Name | Gailene R. Gabel |
| Group Art Unit | 1641 |
| Attorney Docket No. | SRX 110 |

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

| | |
|------------------------|----------------------|
| Deposit Account Number | 50-1868 |
| Deposit Account Name | Holland & Knight LLP |

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

Applicant claims small entity status.
See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|--|----------|
| 105 130 | 205 85 | Surcharge - late filing fee or oath | |
| 127 60 | 227 26 | Surcharge - late provisional filing fee or cover sheet | |
| 138 130 | 139 130 | Non-English specification | |
| 147 2,520 | 147 2,520 | For filing a request for ex parte reexamination | |
| 112 820* | 112 820* | Requesting publication of SIR prior to Examiner action | |
| 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | |
| 116 110 | 215 55 | Extension for reply within first month | 55.00 |
| 116 390 | 216 195 | Extension for reply within second month | |
| 117 890 | 217 445 | Extension for reply within third month | |
| 118 1,390 | 218 695 | Extension for reply within fourth month | |
| 128 1,880 | 228 945 | Extension for reply within fifth month | |
| 119 310 | 218 195 | Notice of Appeal | |
| 120 310 | 220 195 | Filing a brief in support of an appeal | |
| 121 270 | 221 135 | Request for oral hearing | |
| 138 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| 140 110 | 240 55 | Petition to revive - unavoidable | |
| 141 1,240 | 241 620 | Petition to revive - unintentional | |
| 142 1,240 | 242 620 | Utility issue fee (or reissue) | |
| 143 440 | 243 220 | Design issue fee | |
| 144 600 | 244 300 | Plant issue fee | |
| 122 130 | 122 130 | Petitions to the Commissioner | |
| 123 50 | 123 50 | Petitions related to provisional applications | |
| 126 240 | 128 240 | Submission of Information Disclosure Stmt | |
| 581 40 | 681 40 | Recording each patent assignment per property (times number of properties) | |
| 146 710 | 246 366 | Filing a submission after final rejection (37 CFR § 1.128(a)) | |
| 148 710 | 248 366 | For each additional invention to be examined (37 CFR § 1.128(b)) | |
| 178 | 279 355 | Request for Continued Examination (RCE) | |
| 189 800 | 169 800 | Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | |

SUBTOTAL (1) (\$)

22 -20 = 2 x 9.00 = 18.00

3 -3 = 0 x 0 = 0

Multiple Dependent

SUBTOTAL (2) (\$ 18.00)

Reduced by Small Entity Filing Fee Paid

SUBTOTAL (3) (\$ 55.00)

SUBMITTED BY

Complete if applicable

| | | | | | |
|-------------------|-----------------|-----------------------------------|--------|-----------|-------------------|
| Name (Print/Type) | Patrea L. Pabst | Registration No. (Attorney/Agent) | 31,284 | Telephone | 404-817-8473 |
| Signature | | | | Date | November 19, 2001 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

079099/00018

PTO/SB/22 (8-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
SRX 110

| | |
|---|------------|
| In re Application of Judith Fitzpatrick, Regina B. Lenda, and Christopher L. Jones | |
| Application Number | 09/526,582 |
| For Method and Device for Detection of APO A, APO B and the Ratio Thereof in Saliva | |
| Group Art Unit | 1641 |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

| | |
|---|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.00 _____.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1868 _____.

I have enclosed a duplicate copy of this sheet.

I am the assignee of record of the entire interest.

applicant.

attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

November 19, 2001

Date

Signature

Patrea L. Pabst, Reg. No. 31,284

Typed or printed name

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Ratio Thereof In Saliva

#14
PP

PTO/SB/31 (08-00)

Approved for use through 10/31/2002, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | | | | | | | |
|--|-------------------------|-------------------------------------|--|----------------------------------|-------------------------|---|--|---------------------|-------------------|
| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) SRX 110 | | | | | | | |
| <p>In re Application of Judith Fitzpatrick, et al.</p> <table border="1"> <tr> <td>Application Number 09/526,582</td> <td>Filed March 16, 2000</td> </tr> <tr> <td colspan="2">For METHOD AND DEVICE FOR DETECTION OF APO A, APO B AND THE RATIO THEREOF IN</td> </tr> <tr> <td>Group Art Unit 1643</td> <td>Examiner G. Gabel</td> </tr> </table> | | | | Application Number 09/526,582 | Filed March 16, 2000 | For METHOD AND DEVICE FOR DETECTION OF APO A, APO B AND THE RATIO THEREOF IN | | Group Art Unit 1643 | Examiner G. Gabel |
| Application Number 09/526,582 | Filed March 16, 2000 | | | | | | | | |
| For METHOD AND DEVICE FOR DETECTION OF APO A, APO B AND THE RATIO THEREOF IN | | | | | | | | | |
| Group Art Unit 1643 | Examiner G. Gabel | | | | | | | | |

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, 1/29/02, rejecting the following claims: 1-23

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 320.00.

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 160.00.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-1868. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

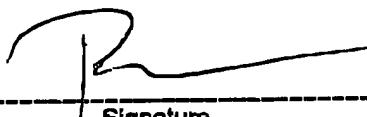
I am the

applicant.

assignee of record of the entire interest.

attorney or agent of record.

attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). Patrea L. Pabst, Reg. 31,284



Signature

Patrea L. Pabst, Reg. 31,284
Typed or printed nameMay 29, 2002
Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

07/30/2002 NVILLARI 00000001 501868 09526582

02 FC:219

160.00 CH